
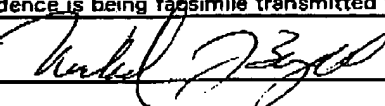


<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/517.994	<b>CENTRAL FAX CENTER</b>
	Confirmation Number	<b>MAR 14 2008</b>	
	Filing Date	with an effective filing date of June 21, 2003	
	First Named Inventor	Uwe BEER and Michael DRABEK	
	Group Art Unit	3681	
	Examiner Name	Doron D. Fields	Fax: (571) 273-8300
Total No. of Pages in this Submission: 11	Attorney Docket Number	ZAHFRI P701US	
ENCLOSURES (check all that apply)			
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached - Check \$ <input checked="" type="checkbox"/> Amendment/Response - 10 pgs. <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (in Duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Stmt <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful) <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below):	
REMARKS			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual Name	Michael J. Bujold DAVIS BUJOLD & DANIELS P.L.L.C.		Reg. No. 32,018 CUSTOMER NO. 020210
Signature			
Date	March 14, 2008		
CERTIFICATE OF TRANSMISSION			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO on March 14, 2008			
Signature			Date: March 14, 2008 (aag)

RECEIVED  
CENTRAL FAX CENTER

MAR 14 2008

03/14/8

PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of	:	Uwe BEER and Michael DRABEK
Serial no.	:	10/517,994
Confirmation No.	:	
Filed	:	with an effective filing date of June 21, 2003
For	:	SHIFTING DEVICE
Group Art Unit	:	3681
Examiner	:	Doron D. Fields
Docket	:	ZAHFRI P701US

The Commissioner for Patents  
U.S. Patent & Trademark Office  
P. O. Box 1450  
Alexandria, VA 22313-1450

## RESPONSE

Dear Sir:

[XXX] NO FEES ARE PAYABLE WITH RESPECT TO THIS RESPONSE.
----------------------------------------------------------

In response to the official action mailed December 17, 2007, please enter the following before reconsideration of this application.

**In the Specification:**

Please amend paragraphs [001] and [011] of the specification as follows in which the specification additions are shown by underlining and the specification deletions are shown by strikeout or double brackets. Please enter the replacement specification paragraphs into the record of this case.

**In the Title:**

Please amend the title of the invention as follows in which the title addition are shown by underlining. Please enter the amended title into the record of this case.

**In the Claims:**

Please add new claims 9-14 and amend claims 6-8 as follows in which the claim additions are shown by underlining and/or the claim deletions are shown by strikeout or brackets. Please enter the new and the amended claims into the record of this case.